DATENT	ADDI ICATION	CCC	DETERMINATION	DECODO
PAIENI	APPLICATION	FEE	DETERMINATION	RECURD

Effective October 1, 2000

Application or Docket Number

SRT-023

CLAIMS AS FILED - PART I (Column 1) (Column 2)					ımn 2)	SMALL E	SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS		21				RATE	FEE	1	RATE	FEE		
FOR		NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS		2 minus 20=		•		X\$ 9=		OR	X\$18=	18		
INDEPENDENT CLAIMS			3 minus 3 = *		•		X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT			RESENT				+135=	-	OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	TOTAL	रामान्य प्रत्यम् र	OR	TOTAL	728	
CLAIMS AS AMENDED - PART II								ENTITY	• •	OTHER SMALL	THAN	
	-	(Column 1) CLAIMS		(Colu		(Column 3)	SMALL		OR	SWALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X\$ 9=	-	OR	X\$18=		
AME	Independent	*	Minus	***	5 01 4114	=	X40=		OR	X80=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDEN	CLAIM		+135=		OR	+270=		
							TOTAL			TOTAL		
		(O. I		(0.1		(0-1	ADDIT. FEE		JOI!	ADDIT. FEE		
		(Column 1) CLAIMS		(Colu		(Column 3)			1			
AMENDMENT B		REMAINING AFTER AMENDMENT			BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	7	
AME	Independent	*	Minus	***	5.01.4144	=	X40=		OR	X80=		
	FIRST PRESE	NTATION OF MI	JUIPLE DE	PENDEN	CLAIM		+135=		OR	+270=		
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	.	=	X40=		OR	X80=		
Ļ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIN		+135=			+270=		
•	f the entry in colu	mn 1 is less than t	he entry in col	umn 2, writ	e "0" in co	olumn 3.			OR			
***	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											